

PARADE ENTRY FORM

Saturday, June 18, 2016

Registration will be at Union Gap City Hall (Fire Department Building) located at 107 W. Ahtanum Rd. Parade will line up on 1st Street and Main, head south on Main Street and end by turning right onto Yakima Street. Line-up is at 8:00 am. Parade begins at 10:00 am. Deadline for parade entry is Wednesday June 15, 2016. Entry cost is free.

Type of Entry- Please select o	ne:			
Car/Pick up Band _	Drill Team	Ag Equipm	ent	
Horses Float	Commercial	Political	Other	
Are you part of a group? If so,	, who are you with?			
Name of Entry:				
Sponsoring Organization:				
Person in Charge of Entry:				
Address:				
City:	State:	Zip Code: _		
Email:				
Phone Number:	Cell Phone:			

Indemnification and Hold Harmless		
I	on agains sing out r It I am pr	t the City of Union Gap, it's my participation in the Union Gap
Date: Signature:		
Description of entry (if float please include the nar	nes of th	e riders)
Rules and guidelines:		
Line-up is on 1 st Street headed North beginning at proceeds South on Main Street to the corner of M You may return up 1 st St back towards the Fire Sta	ain and Y	akima where the parade will end.
 All live animal entries MUST provide their of the No alcoholic beverages are allowed. Parade participants may not accost parade Music is allowed with tasteful volume. Parade entrants must observe all applicable from Police and Parade Officials. Parade Officem the parade either prior to the parade All units may be inspected for safety. 	e spectato e rules an fficials res	rs. d regulations and follow all instructions erve the rights to remove any entrants
Your signature indicates you understand these rule certifying that all members of your organization to these rules. You also agree that each member of y harmless the City of Union Gap, its officers, emplo from any claim or demand for personal injury, deathrough or in connection with the Old Town Days the City of Union Gap as additional insured.	iking part our orga yees and th or pro	in this event have been notified of nization agree to indemnify and old volunteers assisting in this event, operty damages that may arise
Signature:	Date:	
Print Name:		Please submit entry form and proof of

Organization:

lease submit entry form and proof Insurance to: Union Gap Old Town Days Union Gap City Hall PO Box 3008 Union Gap, WA 98903 509.248.0432